

PART B - FEE(S) TRANSMITTAL

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7590

02/19/2004

DOWELL & DOWELL, P.C.
SUITE 309
1215 JEFFERSON DAVIS HIGHWAY
ARLINGTON, VA 22202-3124



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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/669,492	09/25/2000	Thierry Ifergan	64875	3091

TITLE OF INVENTION: FLEXIBLE EYEGLASS DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	05/19/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MAI, HUY KIM	2873	351-058000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1	_____
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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- ☐ Advance Order - # of Copies _____

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(Authorized Signature)

(Date)

Ralph A. Dowell 26,868 5/19/04

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